

Training Institution Accreditation Renewal**STUDENT QUESTIONNAIRE**

The purpose of this questionnaire is to provide OEMS a real time snapshot of student's comprehension of program dynamics.

Institution Responsibilities: The questionnaire shall be completed by all students in your current EMT-Basic, EMT-Intermediate, or EMT-Paramedic classes where applicable. Each student shall be provided a copy of this questionnaire and instructed to answer all questions honestly and anonymously, and return to instructor in a timely manner. The questionnaire will not be used by OEMS to deny or approve training institution accreditation, but only as a resource to determine future accreditation initiatives. Please feel free to review completed questionnaires for internal quality assurance/quality improvement.

Student Responsibilities: Please answer all questions honestly and anonymously and return to program instructor before leaving class.

Circle training Level your currently enrolled in: EMT-B EMT-I EMT-P

OEMS Course Registration # _____

Name of Sponsoring Institution: _____

Course Location _____

Course Start Date _____ **Course End Date** _____

1. How did you find out about this training program:
 - a. Friend or relative ☐
 - b. Sign posted on building ☐
 - c. Radio or Newspaper ad ☐
 - d. Web site ☐
 - e. Mailing or ad flier ☐
2. Did you complete an entrance exam for the program?
☐ Yes ☐ No
3. Did you complete an entrance interview for the program? ☐ Yes ☐ No
4. Did you fully understand the training institution's fee requirements and course completion time lines before signing on to the program?
☐ Yes ☐ No
5. Do you fully understand the program's attendance (100% attendance required) policy? ☐ Yes ☐ No

6. Do you fully understand the program's Absentee and make-up policy? ☐ Yes ☐ No
7. Does your institution provide academic counsel if you are having trouble? ☐ Yes ☐ No
8. Understanding that you may not have used EMS equipment in the past how would you rate the quality of your program's lab equipment:
- ☐ Most equipment appears new or well maintained
 - ☐ Most equipment appears new or well maintained, but a small portion appears to need replacing.
 - ☐ Equipment varies about half is well maintained and the rest appears in poor condition or needs repair
 - ☐ Equipment is usable but most is in need of repair
 - ☐ Equipment is generally in poor condition and in need of replacing or repair
9. The location provided for lab sessions:
- ☐ Is an adequate space with freedom of movement for all students
 - ☐ Is workable but would be better with more student separation
 - ☐ Is small and hard to position with out interference
10. Is the course instructor (s) available for questions during, before, or after class
- ☐ Always
 - ☐ Most of the time
 - ☐ Occasionally
 - ☐ I don't ask questions
11. Does the program provide a list of internet resources and if so do you find them helpful
- ☐ Yes, they are helpful
 - ☐ Yes, but don't find much use for them
 - ☐ No internet resources provided by program but I can imagine they may be of interest
12. Did the program provide you with information concerning the location, web address, and responsibilities of the Office of Emergency Medical Services (OEMS)
- ☐ Yes
 - ☐ No

10/1/07

Please write your program observations for the last
two questions

13. What I like the most about this training program:

14. One item that needs improvement is: